

elite choice

What to expect from your dental plan:

Everyone insures what they never want to lose: houses, cars, jewelry, themselves and their loved ones, etc. Why shouldn't you insure your teeth? After all, you put them through tough paces every day and rarely think about them – unless there's a problem.

CompBenefits' Elite Choice dental insurance will give you the same confidence as your homeowners or life insurance with coverage for your visits, especially for preventive care like routine cleanings and x-rays.

If you need more involved specialty care, Elite Choice will pay your claim, based on your summary of benefits, and you can choose to see a specialist.

With Elite Choice you can choose any dentist you like for your care. And when it's time to file a claim, you can be confident that our state-of-the-art claims center will pay your claim accurately and in a few days.

Deductibles and plan maximums apply, and some Elite Choice plans may include waiting periods for certain services.

Get more out of your dental plan @ www.mycompbenefits.com

Want to know the status of a claim? Need to find a dentist closer to you? You can do all of this and more at www.mycompbenefits.com. Registering for this service is simple and will give you access to your plan benefits, including your benefit information, claims status, a list of providers and the option to change your account information. Just a few clicks of the mouse, and you'll be checking out your benefits in no time.



*Total Freedom to
Select Any Dentist*

frequently asked questions

Q. *How do the plans work?*

A. Under CompBenefits' Elite Choice plans, you do not have to pre-select a primary dentist. When you want dental services, simply make your appointment with any licensed dentist. Once services are performed, you or your dentist will file a claim form to receive reimbursement. Your claim will be paid based on your group's Schedule of Benefits. Your plan will pay a percentage of the reimbursement amount, up to the plan's annual limit for benefits.

Q. *How much of the dental charges does my plan cover?*

A. Payment schedules vary from plan to plan. Please check your Schedule of Benefits for more details.

Q. *What is predetermination?*

A. Predetermination is a request that may require the provider to submit a treatment plan to the third-party payer before treatment is begun.

Q. *When is predetermination required?*

A. If planned treatment is going to cost you more than \$200, you should ask the dentist to file for predetermination of benefits prior to rendering services. Predetermination is not necessary for emergency treatment.

Q. *How does my bill get paid?*

A. Each dentist bills separately. Your dentist may agree to file your insurance claim for you. If he or she does not, however, you may be required to pay the entire bill at time of service and will need to submit a claim form to CompBenefits for your reimbursement. All financial arrangements concerning payment are strictly between you and your dentist and should be determined prior to treatment.

Q. *Can I go online to find out more about my plan or get assistance?*

A. Yes. After you enroll, you can visit www.mycompbenefits.com to learn about your plan, to check your benefits, to obtain a claim form, to use our Provider Locator, to send us an e-mail and more.

Q. *Where do I send my claims?*

A. You can get a claim form from your Group Benefits Administrator, from CompBenefits' Member Services department or from our Web site, www.mycompbenefits.com. Mail it to:

CompBenefits Claims

P.O. Box 8236

Chicago, Illinois 60680-8236